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PTO/SB/01 (12-97)  
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	JAB 1458 -PCT-USA
	<b>First Named Inventor</b>	Masure, Stefan L.J.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	/
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HUMAN AKT-3

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) 12/17/1999 as United States Application Number or PCT International Application Number PCT/GB99/04311 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9828375.7 /	GB /	12/22/1998 /	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Steven P. Berman	<u>24,772</u>	Michael Stark	<u>32,495</u>
Andrea L. Colby	<u>30,194</u>	Ellen C. Coletti	<u>34,140</u>
		Mary A. Appollina	<u>34,087</u>

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name	<u>Philip S. Johnson</u>				
Address	<u>Johnson &amp; Johnson</u>				
Address	<u>One Johnson &amp; Johnson Plaza</u>				
City	<u>New Brunswick</u>	State	<u>NJ</u>	ZIP	<u>08933-7003</u>
Country	<u>USA</u>	Telephone	<u>(732) 524-2359</u>	Fax	<u>(732) 524-2808</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
<u>Stefan Leo Jozef</u>	<u>Masure</u>

Inventor's Signature				Date	<u>5 April '04</u>
Residence: City	<u>B-2930 Brasschaat</u>	State	<u>BEX</u>	Country	<u>Belgium</u>
Post Office Address	<u>c/o Janssen Pharmaceutica N.V., Turnhoutseweg 30</u>				
Post Office Address					
City	<u>Beerse</u>	State		ZIP	<u>2340</u>
				Country	<u>Belgium</u>

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 3 of 3

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Alan

Richardson

Inventor's  
Signature

Date

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Name of Additional Joint Inventor, if any:

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Given Name (first and middle [if any])

Family Name or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

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Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

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Inventor's  
Signature

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Residence: City

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : MASURE et al.

Serial No. : Art Unit:

Filed : June 20, 2001 Examiner:

For : HUMAN AKT-3

Commissioner for Patents  
Washington, D.C. 20231


ASSOCIATE POWER OF ATTORNEY

Sir:

In the matter of the above-identified application, I hereby appoint Myra H. McCormack (Reg. No. 36,602), whose postal address is One Johnson & Johnson Plaza, New Brunswick, New Jersey 08933-7003, my associate attorney to prosecute said application, to make alterations and amendments therein, to file continuing applications claiming the benefit of said application, to receive the patent and to transact all business in the Patent Office connected with said application.

I request all communications with respect to said application be addressed to Philip S. Johnson, One Johnson & Johnson Plaza, New Brunswick, New Jersey 08933-7003. All telephone calls should be directed to Myra H. McCormack at (732) 524-6932.

Signed at New Brunswick, in the County of Middlesex and State of New Jersey, this 20th day of June, 2001.

  
Mary A. Appollina  
Reg. No. 34,087  
Attorney for Applicant(s)

One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(732) 524-2797  
DATED: June 20, 2001